

Mail to  
DNR  
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Phone (402)471-2363

January 2004  
DNR Form 145

**STATE OF NEBRASKA**  
**DEPARTMENT OF NATURAL RESOURCES**  
**WATER WELL REGISTRATION**

**FOR DEPARTMENT USE ONLY**

Registration Date \_\_\_\_\_ Sequence No. \_\_\_\_\_ Registration No. \_\_\_\_\_  
Owner Code No. \_\_\_\_\_ Receipt No. \_\_\_\_\_ NRD \_\_\_\_\_

1. a. Well Owner's First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
b. Company Name \_\_\_\_\_  
c. Correspondent Name \_\_\_\_\_ Attention \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_
2. a. Contractor's License No \_\_\_\_\_ Contractor's Name \_\_\_\_\_  
Contractor's Email Address \_\_\_\_\_  
b. Drilling Firm Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_  
Drilling Firm's Email Address \_\_\_\_\_
3. a. Well location \_\_\_\_\_ 1/4 of the \_\_\_\_\_ 1/4 of Section \_\_\_\_\_, Township \_\_\_\_\_ North, Range \_\_\_\_\_ E W , \_\_\_\_\_ County.  
b. Natural Resources District \_\_\_\_\_  
c. The well is \_\_\_\_\_ feet from the (N S ) section line and \_\_\_\_\_ feet from the (E W ) section line  
(circle one) (circle one)  
or Latitude Degree \_\_\_\_\_ Minute \_\_\_\_\_ Second \_\_\_\_\_  
Longitude Degree \_\_\_\_\_ Minute \_\_\_\_\_ Second \_\_\_\_\_  
d. Street address and subdivision, if applicable \_\_\_\_\_  
Block \_\_\_\_\_ Lot \_\_\_\_\_  
e. Location of water use, if applicable (give legal descriptions) \_\_\_\_\_  
f. If for irrigation, the land to be irrigated is \_\_\_\_\_ acres.  
g. Well reference letter(s), if applicable \_\_\_\_\_ HHSS PWSID \_\_\_\_\_

4. Permits  
Management Area Permit Number \_\_\_\_\_ Surface Water Permit Number \_\_\_\_\_  
Geothermal Permit Number \_\_\_\_\_ Industrial Permit Number \_\_\_\_\_  
Municipal Permit Number \_\_\_\_\_ Transfer Out-Of-State Permit Number \_\_\_\_\_  
Well Spacing Permit Number \_\_\_\_\_ Conduct Permit Number \_\_\_\_\_  
HHSS \_\_\_\_\_ Other Permit Number \_\_\_\_\_  
NDEQ \_\_\_\_\_

5. Purpose of well (indicate one) \_\_\_\_\_ Aquaculture \_\_\_\_\_ Commercial/Industrial \_\_\_\_\_ Dewatering (over 90 days) \_\_\_\_\_  
\_\_\_\_\_ Domestic \_\_\_\_\_ Ground Heat Exchanger \_\_\_\_\_ Groundwater Source Heat Pump \_\_\_\_\_ Irrigation \_\_\_\_\_ Injection \_\_\_\_\_  
\_\_\_\_\_ Livestock \_\_\_\_\_ Monitoring \_\_\_\_\_ Observation \_\_\_\_\_ Public Water Supply (with spacing (46-638)) \_\_\_\_\_  
\_\_\_\_\_ Public Water Supply (without spacing) \_\_\_\_\_ Recovery \_\_\_\_\_ Other \_\_\_\_\_  
(indicate use)

6. Wells in a Series.  
a. Is this well a part of a series? \_\_\_\_\_ Yes go to part b of this section \_\_\_\_\_ No go to part 7 of this application  
b. If one or more of the wells in the series is currently registered, give the well registration number \_\_\_\_\_  
c. How many wells in the series are you registering at this time? \_\_\_\_\_

7. Replacement and abandoned well information.  
a. Is this well a replacement well? \_\_\_\_\_ Yes \_\_\_\_\_ No  
b. Registration number of abandoned well \_\_\_\_\_ If not registered, date abandoned well was constructed (m)\_\_\_\_/(d)\_\_\_\_/(y)\_\_\_\_  
c. Replacement well is \_\_\_\_\_ feet from abandoned well. d. Abandoned well last operated (m)\_\_\_\_/(d)\_\_\_\_/(y)\_\_\_\_  
e. Original well pump column size \_\_\_\_\_ inches. f. Completion of original well abandonment on (m)\_\_\_\_/(d)\_\_\_\_/(y)\_\_\_\_  
g. Location of water use of abandoned well \_\_\_\_\_

8. Pump Information.

a. Is pump installed at this time \_\_\_\_Yes \_\_\_\_No

Is pump installed by well owner in section 1? \_\_\_\_Yes \_\_\_\_No Is pump installed by contractor in section 2? \_\_\_\_Yes \_\_\_\_No

If pump installed by pump installer, please fill out license number below

b. Pump Installer's License No.\_\_\_\_ Pump Installer's Name\_\_\_\_\_

Pump Installer's Email Address\_\_\_\_\_

Pump Installer's Firm Name\_\_\_\_\_

Pump Installer's Firm Address\_\_\_\_\_

City\_\_\_\_\_ State \_\_\_\_\_ Zip\_\_\_\_\_ Telephone \_\_\_\_\_

Pump Installer's Firm Email Address\_\_\_\_\_

c. Pumping rate \_\_\_\_\_ gallons per minute \_\_\_\_\_ Measured \_\_\_\_\_ Estimated \_\_\_\_\_

d. Drop pipe diameter \_\_\_\_\_ inches e. Length of drop pipe \_\_\_\_\_ feet

f. Pumping equipment installed (m)\_\_\_\_/(d)\_\_\_\_/(y)\_\_\_\_ g. Pump Brand\_\_\_\_\_

h. This well is designed and constructed to pump less than 50 gpm \_\_\_\_Yes \_\_\_\_No

9. Well Construction Information.

a. Total well depth \_\_\_\_\_ feet.

b. Static water level \_\_\_\_\_ feet.

c. Pumping water level \_\_\_\_\_ feet

d. Well Construction began (month)\_\_\_\_/(day)\_\_\_\_/(year)\_\_\_\_

e. Well Construction completed (month)\_\_\_\_/(day)\_\_\_\_/(year)\_\_\_\_ f. Bore hole diameter in inches Top\_\_\_\_\_ Bottom\_\_\_\_\_

g. Casing and Screen Joints are Welded \_\_\_\_ Glued \_\_\_\_ Threaded \_\_\_\_ Other \_\_\_\_\_

10. Well Construction (Casing & Screen)- c, d, e, & g measurements should be in inches to three decimal places

a		b	c	d	e	f	g	h
Placement Depth in Feet		Casing or Screen	Inside Diameter	Outside Diameter	Wall Thickness	Screen Slot Size	Type of Material	Trade Name
From	To							

11. Grout and Gravel Pack

Placement Depth in Feet		Grout or Gravel Pack	Material Description
From	To		

12. Geologic Materials Logged

Depth in Feet		Description
From	To	
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Depth in Feet		Description
From	To	
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(Additional sheets may be submitted)

13. I am familiar with the information submitted on this registration, and to the best of my knowledge it is true.

\_\_\_\_\_  
Water Well Contractor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Well Owner's Signature  
if Contractor is unknown or Deceased

\_\_\_\_\_  
Date